

## AMENDMENTS TO THE CLAIMS

### Listing of Claims

The following listing of claims replaces all previous listings or versions thereof:

1. (Currently amended) A method of treating a malignant tumorous disease in a human patient by administering to said patient a human immunoglobulin ~~specifically binding to the human EpCAM antigen~~ comprising an immunoglobulin heavy chain with the amino acid sequence of SEQ ID NO: 1 and an immunoglobulin light chain with the amino acid sequence of SEQ ID NO: 2, wherein said human immunoglobulin specifically binds to the human EpCAM antigen and ~~exhibiting~~ exhibits a serum half-life of ~~at least 15-20 days after administration to said patient, said serum half-life being determined by enzyme linked immunosorbent assay,~~ said method comprising the step of administering said human immunoglobulin no more frequently than once every two weeks in order to treat said malignant tumorous disease.
2. (Previously presented) The method of claim 1, further comprising:
  - (a) determining, after a period of at least one week following a respective last administration of said immunoglobulin but prior to a respective next administration of said immunoglobulin, the serum level of said immunoglobulin still present in the blood of said patient, thereby obtaining an intermediate serum level value for said immunoglobulin;
  - (b) comparing said intermediate serum level value for said immunoglobulin with a predetermined serum trough level value for said immunoglobulin;
  - (c) effecting the respective next administration if the intermediate serum level value for said immunoglobulin is no more than 15%, preferably 10%, most preferably 5% above the serum trough level value.

3. (Previously presented) The method of claim 1, wherein the magnitude of the dose of said human immunoglobulin administered is set such that, at the end of the intervening time between two respective administrations, the amount of said human immunoglobulin persisting in the serum does not drop below the predetermined serum trough level.
4. (Previously presented) The method of claim 1, wherein said administering takes place once every two weeks or wherein said administering takes place less frequently than once every two weeks.
5. (Original) The method of claim 4, wherein said administering takes place once every two weeks and wherein the administered dose of said human immunoglobulin remains unchanged from one administration to the next.
6. (Original) The method of claim 4, wherein said administering takes place less frequently than once every two weeks and wherein both the administered dose of said human immunoglobulin and the frequency of administration remain unchanged from one administration to the next.
7. (Previously presented) The method of claim 5, wherein the magnitude of the initial and all subsequent doses is determined by pharmacokinetic simulation.
8. (Previously presented) The method of claim 1, wherein said administering is intravenous, intraperitoneal, subcutaneous, intramuscular, topical or intradermal administration.
9. (Previously presented) The method of claim 1, wherein said tumorous disease is breast cancer, epithelial cancer, hepatocellular carcinoma, cholangiocellular cancer, stomach cancer, colon cancer, prostate cancer, head and neck cancer, skin cancer (melanoma), a cancer of the urogenital tract, *e.g.*, ovarian cancer, endometrial cancer, cervix cancer, and kidney cancer; lung cancer, gastric cancer, a cancer of the small intestine, liver cancer, pancreas cancer, gall bladder cancer, a cancer of the bile duct, esophagus cancer, a cancer of the salivatory glands or a cancer of the thyroid gland.

10. (Withdrawn) The method of claim 9, wherein said tumorous disease is prostate cancer or breast cancer and said human immunoglobulin is administered in a dosage of 1 to 7 mg per kg body weight once every two weeks.
11. (Withdrawn) The method of claim 10, wherein said human immunoglobulin is administered in a dosage of 2 to 6 mg per kg body weight once every two weeks.
- 12-17. (Canceled)
18. (Currently amended) The method of claim [[17]]1, wherein said human immunoglobulin is formulated for administration no more frequently than once every two weeks.
19. (Currently amended) The method of claim [[17]]1, wherein said human immunoglobulin is formulated for administration every two weeks and, the administered dose of said human immunoglobulin remaining unchanged from one administration to the next.
20. (Currently amended) The method of claim [[17]]1, wherein said human immunoglobulin is formulated for administration less frequently than once every two weeks, the administered dose of said human immunoglobulin administered being set such that, at the end of the intervening time between two respective administrations, the amount of said human immunoglobulin persisting in the serum does not drop below a serum trough level determined to be necessary for therapeutic efficacy.
- 21-22. (Canceled)
23. (Currently amended) The method of claim [[1]]2, further comprising repeating steps (a) and (b) prior to step (c).
24. (Previously presented) The method of claim 6, wherein the magnitude of the initial and all subsequent doses is determined to be pharmacokinetic stimulation.

25. (Withdrawn) The method of claim 22, wherein the cancer of the urogenital tract is ovarian cancer, endometrial cancer, or cervix cancer.
26. (New) The method of claim 1, wherein the serum half-life is 20 days, 19 days, 18 days, 17 days, 16 days or 15 days.
27. (New) The method of claim 26, wherein the serum half-life is 15 days.